

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>244</i>	<i>2/3/99</i>
O.I.P.E. CLASSIFIER		<i>31</i>	<i>2/3/99</i>
FORMALITY REVIEW	<i>W</i>	<i>674</i>	<i>2-11-99</i>

INDEX OF CLAIMS

..... Rejected N Non-elected
 Allowed I Interference
 (Through numeral)... Canceled A Appeal
 Restricted O Objected

Claim	Final	Original	Date
1		13	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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